



## Application Data Sheet

### Application Information

Application number:: 10/549,445  
Filing Date:: September 14, 2005  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R??:  
Number of CD disks::  
Number of copies of CDs::  
Sequence Submission::  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title::  
Attorney Docket Number:: 40853-01-5133-US  
Request for Early Publication:: No  
Request for Non-Publication:: No  
Suggested Drawing Figure::  
Total Drawing Sheets::  
Small Entity?:: Yes  
Latin name::  
Variety denomination name::  
Petition included?:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers One::  
Secrecy Order in Parent Appl.: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Shawn  
Middle Name::  
Family Name:: DeFrees  
Name Suffix::  
City of Residence:: North Wales  
State or Province of Residence:: PA  
Country of Residence:: US  
Street of Mailing Address:: 126 Filly Drive  
City of Mailing Address:: North Wales  
State or Province of mailing address:: PA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 19454

**Correspondence Information**

Correspondence Customer Number:: 043850

**Representative Information**

Representative Customer Number:: 043850

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US2004/007931	03/15/04
PCT/US2004/007931	<i>An application claiming the benefit under 35 USC 119(e)</i>	60/454,993	03/14/03
PCT/US2004/007931	<i>An application claiming the benefit under 35 USC 119(e)</i>	60/474,094	05/29/03
PCT/US2004/007931	<i>An application claiming the benefit under 35 USC 119(e)</i>	60/509,752	10/07/03

**Foreign Priority Information**

Country::	Application number::	Filing Date::
WO	PCT/US2004/007931	03/15/04

**Assignee Information**

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::